PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with

pplicable fee(s), to: Mail

Mail Stop ISSU EE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

maintenance fee notificati	ons.		—————	<u> </u>	dress; and/or (0) indicating a sep		
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying			
21839	7590 07/08/2004			papers. Each add have its own cert	litional paper, such as an assignm lificate of mailing or transmission.	ent or formal drawing, must	
BURNS DOAN	E SWECKER & MA	THIS PIEP		•	Certificate of Mailing or Tran	smission	
POST OFFICE B		\Q. \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	\	I hereby certify to States Postal Ser	that this Fee(s) Transmittal is being	ng deposited with the United	
ALEXANDRIA, VA 22313-1404				I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.			
OCT O 6 ZOLA E				(Depositor's name)			
				APPLICATION NO.	FILING DATE	FIRST NAMED INVE	
10/618,716	07/15/2003	Makan Chen		hen	004501-733	7399	
TITLE OF INVENTION: SUPERCONDUCTING FAULT CURRENT LIMITER 10/07/2004 FNETEKI2 00000054 10618716							
			, L	01 FC:1501 02 FC:1504	1370.00 300.00	NP	
APPLN, TYPE	SMALL ENTITY	ISSUE FEE	1	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1830/1.	370	\$300	\$1630 1670	10/08/2004	
	·	•	1:				
EXAMINER		ART UNIT	<u> </u>	CLASS-SUBCLASS			
LEJA, RONALD W		2836		361-019000			
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. □ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AN	D RESIDENCE DATA TO E	BE PRINTED ON THE	PATENT (p	print or type)			
PLEASE NOTE: Unle	ss an assignee is identified b in 37 CFR 3.11. Completion	elow, no assignee data of this form is NOT a s	will appear substitute for	on the patent. If an a	assignee is identified below, the	document has been filed for	
(A) NAME OF ASSIG	NEE	(B) R1	ESIDENCE:	(CITY and STATE OF	R COUNTRY)		
ABB RESEARCH LTD. ZURICH, SWITZERLAND							
Please check the appropriate assignee category or categories (will not be printed on the patent);							
4a. The following fec(s) are enclosed: 4b. Payment of Fee(s):							
☐ A check in the amount of the fee(s) is enclosed.							
№ Publication Fee (No small entity discount permitted) № Payment by credit card. Form PTO-2038 is attached. № Advance Order - # of Copies							
A ridvance Order - # 0	. Copies	De	posit Accour	it Number 02-4	(enclose an extra c	copy of this form).	
•	s (from status indicated above	•	4				
a. Applicant claims S	MALL ENTITY status. See 3	37 CFR 1.27.	o. Applicant	is not claiming SMALI	L ENTITY status. See, e.g., 37 CF	R 1.27(g)(2).	
NOTE: The Issue Fee and		will not be accepted fro	m anyone of	** * * * * * * * * * * * * * * * * * * *	viously paid issue fee to the applic a registered attorney or agent; or t		
(Authorized Signature)	who I have	(Date)	6-04			····	
Robert S. Swe			-				
This collection of informat an application. Confidentia submitting the completed this form and/or suggestion Box 1450, Alexandria, Vir Alexandria, Virginia 2231	uon is required by 37 CFR 1.3 ality is governed by 35 U.S.C application form to the USPT ns for reducing this burden, signia 22313-1450. DO NOT 3-1450.	11. Inc information is 122 and 37 CFR 1.14 O. Time will vary dep hould be sent to the Ch SEND FEES OR COM	required to one of the collection of the collect	obtain or retain a benefition is estimated to tak the individual case. A ion Officer, U.S. Paten ORMS TO THIS ADD	it by the public which is to file (an ite 12 minutes to complete, including comments on the amount of the tand Trademark Office, U.S. Departments of the commissioner	a by the USPTO to process) ng gathering, preparing, and me you require to complete authent of Commerce, P.O. for Patents, P.O. Box 1450,	

TRANSMIT THIS FORM WITH FEE(S)

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.